

PTO/SB/81 (07-qs) Approved for use through 12/31/2008. OMB 0651-0035

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CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name Dzung D. Tran
CONTROL OF CONTROL ADDITEDS	Attorney Docket Number 4202-01600
I hereby revoke all previous powers of attorney given in the above-identified application.	
A Power of Attorney is submitted herewith.	
OR Rereby appoint Practitioner(s) associated with the following Number as mylour atternsy(s) or agent(s) to prosecute the st identified above, and to transact all business in the United S and Trademark Office connected therewith:	application
OR I hereby appoint Practitioner(s) named below as my/our atto to transact all business in the United States Patent and Trace	tomey(s) or agent(s) to prosecute the application identified above, and ademark Office connected therewith:
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Please recognize or change the correspondence address for the above-Identified application to:	
The address associated with the above-mentioned Customer Number.	
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I am the: Applicant/Inventor, OR	
Assignce of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(a) (Form PTO/SB/96) submitted herewith or filed on	
STATURE of Applicant or Assignee of Record	
Signature	Date 21th August 2008
Name Sun Tatouro	Telephone +86-766-83-97800
Title and Company Dresident Yware Tech	indogies (n. LTD
NOTE: Signatures of all the Inventors or assignees of record of the entire interest cylindir representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
Total of forms are submitted.	

This collection of information is equired by 37 CFR 1.3.1, 1.32 and 1.3.3. The information is required to obtain or reteins a benefit by the public velocity in the USPTO operation an application. Confidentiality is governed by \$1.0.5.C. 1.20 and \$7.0.R.1.1 and 1.4.1 This collection is estimated to also a promises to complete, including gathering, preparing, and submitting that completed application form to the USPTO. Time will vary depending upon the inclindrical case. Any comments on the nancut of time you require to complete this form market required in the USPTO. Time will vary depending upon the inclindrical case. Any comments on the nancut of time, you require to complete this form market required in the formation, which was early to the Critical International Confidence, P.O. Box 1463, Alexandria, VA 2231-1.450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FOR COMPLETED FORMS TO T